

| POSITION                  | INITIALS   | ID NO.       | DATE            |
|---------------------------|------------|--------------|-----------------|
| FEE DETERMINATION         | <i>LEW</i> | <i>68704</i> | <i>7/20/00</i>  |
| O.I.P.E. CLASSIFIER       | <i>FIN</i> |              | <i>7/20/00</i>  |
| FORMALITY REVIEW          | <i>SS</i>  | <i>69916</i> | <i>8/22/00</i>  |
| RESPONSE FORMALITY REVIEW |            | <i>69134</i> | <i>12/25/01</i> |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 +/- ..... Restricted      O ..... Objected

| Claim             | Date    |
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| Final<br>Original | 10/4/03 |
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| Claim             | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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